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(Depositor's name)	Doug <i>la</i> s J. Christensen
(Signature)	4 Jegles Clube
(Date)	July 1, 6004
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APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/523,745	03/13/2000	David L. Nyseth	2267.416US02	7509

TITLE OF INVENTION: WAFER CONTAINER WITH MINIMAL CONTACT

nonprovisional NO \$1330 \$0 \$1330 07/01/2004  EXAMINER ART UNIT CLASS-SUBCLASS  FIDEI, DAVID 3728 206-711000  1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).  Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  "Fee Address" indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.  ART UNIT CLASS-SUBCLASS  206-711000  2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single frim (having as a member a registered attorney or agents) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.  2 Skaar & Christense attorneys or agents. If no name is listed, no name will be printed.	APPLN. TYPE	SMALL ENTITY	ISSUE FEE		PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
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(A) NAME OF ASSIGNEE

Entegris, Inc.

Chaska, Minnesota

Please check the appropriate assignee category or categor	ies (will not be printed on the patent);	🚨 individual	Excorporation or other private group entity	government
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₹ Issue Fee	🐴 A check in the amo	ount of the fee(s)	is enclosed.	
☐ Publication Fee	☐ Payment by credit of	card. Form PTO	-2038 is attached.	
Advance Order - # of Copies10	The Director is he Deposit Account Nun	reby authorized	3by charge the required fee(s), or credit any (enclose an extra copy of this	overpayment, to form).

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